Filed 12/27/2005

OFFICE OF THE SHERIFF WARREN COUNTY, PENNSYLVANIA

407 Market Street Warren, Pennsylvania 16365

TELEPHONE (814) 723-7553 FAX (814) 726-2113

November 6, 2003

To:

From:

Inmate Josh Anderson
Sheriff Larry E. Kopko UNNU E. Kupho

Subj:

Your letter

Case 1:04-cv-00135-SJM

This is to advise you that I am in receipt of your letter sent via the U.S. Mail to advise me that you are having problems with staff and that you are going to contact a whole myriad of agencies to investigate this office.

If you wish to initiate an investigation against this institution, that is your right to do, and I assure you that we will cooperate fully with any investigation that might occur.

I have directed the Correctional Supervisor, Captain Douglas A. Irvine and Deputy Correctional Supervisor Lieutenant Randy Ickert to initiate an investigation into the allegations that you have made. They will be contacting you for the names of the Correctional Officers that you are accusing since you failed to provide their names. I hope that you will cooperate with them fully on this investigation.

Since you feel that you are not being treated equally at this facility, I am willing to try to make arrangements with another institution to house you until your trial date arrives, if that is something you might be interested in. Let me know your decision on this.

Thank you for your letter. I hope to bring this situation to resolve in the very near future.

2 H 7 L L L	
Public Public Jail ph FROM: Tequest or problem. State your request or problem. At the second secondact, form IRF RE. 5/95)	To: (Check One)
Public Defender FROM: Jail Physician (Doctor) State your request or problem. BE SPECIFIC! ASSUMED THE STATE: Public Defender Jail Physician (Doctor) DATE: DATE: PATE:	WARREN COUNTY JAIL INMATE REQUEST FORM
Counselling Office Chaplain Work Release Office Other DATE: (0-201-2 AS. R. L. L. San Pervisor. J.	EST FORM
Office Of	

EXHIBIT - B

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Avenali, Kate

From:

Sent:

Hepinger, Tim
Thursday, October 24, 2002 137, PM 1
Avenali, Kate; Burns, Robert; Ickert, Randy
JOSH ANDERSON

To:

Subject:

I DON'T KNOW WHAT IS GOING ON WITH TOSH WANTING TO TALK TO KATIE. BUT COULD THE THREE OF YOU GET ON THE SAME PAGE OF MUSIC AND LET HIM KNOW. HE IS GETTING DIFFERENT STORIES AND WOULD LIKE ONE ANSWER, WHATEVER IS DECIDED.

THANKS, HEPINGER

EXHIBIT-C

FORM J-16

WARREN COUNTY SHERIFF'S OFFICE / COUNTY JAIL INMATE GRIEVANCE REPORT FORM

TO BE COMPLETED BY AN INMATE INCARCERATED IN THE COUNTY JAIL TO SUBMIT A COMPLAINT CONCERNING THE CARE, CUSTODY, OR CONTROL PROCEDURES ADMINISTERED BY THE JAIL. A COPY OF THE JAIL POLICIES AND PROCEDURES FOR HANDLING INMATE COMPLAINTS IS FILED IN EACH GUARD STATION AND IS AVAILABLE FOR YOUR EXAMINATION UPON REQUEST.

COMPLAINTS CONCERNING SENTENCES, PAROLE AND PROBATION OR PROCEDURES OF OTHER CRIMINAL JUSTICE AGENCIES MUST BE SUBMITTED DIRECTLY TO THAT AGENCY.

Name of Complainant

Block and Cell No.

Offices Katic L. Avenal.

Name of Employee if Complaint pertains to an Individual

1. Describe your complaint, state the facts including date, time, and place of occurrence. Use additional paper if necessary. List any witnesses and how and where they can be contacted.

On 12-29-03 officer Avenai Come to get me for a Visit. After 24th's my land cashs and Belt on She much the Belt as tight as She act. Then offer going throughout 15.38 doesn She Sheed me cell Trightal (my had cashs So they could go no tight.

Witnesses - Officer Breon and Sat. Bruss.

2. Describe the specific solution or remedy desired by you.

Tust Shaving the type of thiss She doesn to yet me got!

3-2-04

Date of this Complaint

Signature of Complainant

DISPOSITION OF THIS COMPLAINT WILL BE NOTED ON THE BACK OF THIS FORM AND A COPY WILL BE RETURNED TO THE INMATE.

EXHIBIT-DI

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DISPOSITION

 (X) EXONERATED – the alleged conduct occurred but it was lawful and proper 	Γ;
() UNFOUNDED - the complaint was false or unfounded;	
() NON SUSTAINED – there was insignificant evidence to prove or disprove	the allegation;
() SUSTAINED - the allegation was supported by proper and sufficient evide	ence;

EXPLANATION:

The handcuffs and belt were applied tight as verified by Sgt. Burns when he checked and loosened them. But they were not cutting off your blood flow to your hands. Officers observed you pushing down on the cuffs leaving marks on your wrists. Because of the existing problems you have with Officer Avenali, she did apply the restraints tight as to make sure you could not manipulate or free your hands from the cuffs. Officers are instructed to take extra security precautions when dealing with you and that is what she did.

ACTION TAKEN OR TO BE TAKEN:

Officer Avenali was counseled by Sgt. Burns the same night this occured and was instructed on how to apply restraints safely and effectively with out them being overly tight.

Signature of Correctional Supervisor or Sheriff

EXHIBIT -DI

Date